

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION**

In re:

Leroy L Sadauskas  
Lynn T Sadauskas  
Debtor(s)

Case No. 10 B 01075

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**CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT**

Marilyn O. Marshall, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 01/13/2010.
- 2) The plan was confirmed on 03/31/2010.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was Completed on 05/11/2015.
- 6) Number of months from filing to last payment: 64.
- 7) Number of months case was pending: 66.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: NA.
- 10) Amount of unsecured claims discharged without payment: \$4,373.47.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

**Receipts:**

Total paid by or on behalf of the debtor	\$15,573.66
Less amount refunded to debtor	\$0.51

**NET RECEIPTS: \$15,573.15**

**Expenses of Administration:**

Attorney's Fees Paid Through the Plan	\$3,000.00
Court Costs	\$0.00
Trustee Expenses & Compensation	\$698.07
Other	\$0.00

**TOTAL EXPENSES OF ADMINISTRATION: \$3,698.07**

Attorney fees paid and disclosed by debtor: \$0.00

**Scheduled Creditors:**

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
Advocate Christ Medical Center	Unsecured	205.60	NA	NA	0.00	0.00
Alliance One	Unsecured	1,179.37	NA	NA	0.00	0.00
Armor Southwest Ophthalmic Consult	Unsecured	389.50	NA	NA	0.00	0.00
Arnold S Morof & Assoc	Unsecured	9.00	NA	NA	0.00	0.00
Capital One Bank	Unsecured	NA	1,271.38	1,271.38	1,271.38	127.06
City Of Chicago Dept Of Revenue	Unsecured	NA	122.00	122.00	109.45	12.55
EMS	Unsecured	705.00	NA	NA	0.00	0.00
Endocrine Care LLC	Unsecured	61.93	NA	NA	0.00	0.00
Illinois Collection Service	Unsecured	200.00	NA	NA	0.00	0.00
Kaiser Foundation Hospital	Unsecured	38.00	NA	NA	0.00	0.00
Kevin Kato MD	Unsecured	322.76	NA	NA	0.00	0.00
Loyola University Medical Center	Unsecured	420.00	NA	NA	0.00	0.00
Maui Memorial Medical Center	Unsecured	250.00	3,161.00	3,161.00	3,161.00	316.97
Maui Radiology Associates	Unsecured	32.00	NA	NA	0.00	0.00
MB Financial	Secured	39,000.00	35,498.25	35,498.25	0.00	0.00
MB Financial	Secured	9,933.99	9,942.26	9,942.26	0.00	0.00
Midwest Diagnostic Pathology, SC	Unsecured	17.55	NA	NA	0.00	0.00
Midwest Orthopaedics	Unsecured	159.20	NA	NA	0.00	0.00
NCO Financial Systems	Unsecured	330.01	NA	NA	0.00	0.00
Oaklawn Radiology Imaging	Unsecured	191.00	NA	NA	0.00	0.00
Portfolio Recovery Associates	Unsecured	322.62	368.25	368.25	368.25	37.01
Portfolio Recovery Associates	Unsecured	678.78	718.77	718.77	718.77	71.85
Preferred Open MRI	Unsecured	NA	2,030.40	2,030.40	2,030.40	202.88
Resurgent Capital Services	Unsecured	1,945.19	1,958.52	1,958.52	1,958.52	195.68
Resurgent Capital Services	Unsecured	395.41	450.15	450.15	450.15	45.25
Rush University Medical Center	Unsecured	50.00	NA	NA	0.00	0.00
Schottler & Associates	Priority	3,000.00	NA	NA	0.00	0.00
Southwest Center For Gastroenterolo	Unsecured	50.00	NA	NA	0.00	0.00
World's Foremost Bank	Unsecured	742.66	724.71	724.71	724.71	73.20

<b>Summary of Disbursements to Creditors:</b>			
	<u>Claim Allowed</u>	<u>Principal Paid</u>	<u>Interest Paid</u>
<b>Secured Payments:</b>			
Mortgage Ongoing	\$45,440.51	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$0.00	\$0.00	\$0.00
All Other Secured	\$0.00	\$0.00	\$0.00
<b>TOTAL SECURED:</b>	<b>\$45,440.51</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>Priority Unsecured Payments:</b>			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
<b>TOTAL PRIORITY:</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>GENERAL UNSECURED PAYMENTS:</b>	<b>\$10,805.18</b>	<b>\$10,792.63</b>	<b>\$1,082.45</b>

<b>Disbursements:</b>	
Expenses of Administration	<u>\$3,698.07</u>
Disbursements to Creditors	<u>\$11,875.08</u>
<b>TOTAL DISBURSEMENTS :</b>	<b><u>\$15,573.15</u></b>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 07/27/2015

By: /s/ Marilyn O. Marshall

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Trustee

**STATEMENT:** This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.